

CLAIMS ONLY							Application Number 09/888473		Filing Date	
							Applicant(s)			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* * *		* * *	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	9		9							
Total Depend	10		10							
Total Claims	19		19							

\* May be used for additional claims or amendments